

1400
MFR

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | DM | 49 1822-3 | 1/12/00 |
| RESPONSE FORMALITY REVIEW | | | 1/2/01 |

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral)... Canceled
- ÷ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 11-4-03 | |
| 2 | ✓ | 2-25-04 | |
| 3 | ✓ | 2-17-04 | |
| 4 | ✓ | | |
| 5 | ✓ | | |
| 6 | ✓ | | |
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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51 | ✓ | 11-4-03 | |
| 52 | ✓ | 2-25-04 | |
| 53 | ✓ | 2-17-04 | |
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| 100 | ✓ | | |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 101 | ✓ | 11-4-03 | |
| 102 | ✓ | 2-25-04 | |
| 103 | ✓ | 2-17-04 | |
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| 147 | ✓ | | |
| 148 | ✓ | | |
| 149 | ✓ | | |
| 150 | ✓ | | |

If more than 150 claims or 10 actions
staple additional sheet here
(LEFT INSIDE)

BEST AVAILABLE COPY